

Fill in this information to identify the case:

Debtor Name NJ Mobile Health Care LLC

United States Bankruptcy Court for the: _____ District of New Jersey

Case number: 24-16239-JKS

☐ Check if this is an amended filing

Official Form 425C

Monthly Operating Report for Small Business Under Chapter 11

12/17

Month: 10 - March 2025

Date report filed: 4/15/25
MM / DD / YYYY

Line of business: Ambulance

NAISC code: _____

In accordance with title 28, section 1746, of the United States Code, I declare under penalty of perjury that I have examined the following small business monthly operating report and the accompanying attachments and, to the best of my knowledge, these documents are true, correct, and complete.

Responsible party:

Louis V. Greco III

Original signature of responsible party



Printed name of responsible party

Louis V. Greco III

1. Questionnaire

Answer all questions on behalf of the debtor for the period covered by this report, unless otherwise indicated.

Yes No N/A

If you answer **No** to any of the questions in lines 1-9, attach an explanation and label it **Exhibit A**.

- | | | | |
|--|-------------------------------------|--------------------------|-------------------------------------|
| 1. Did the business operate during the entire reporting period? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Do you plan to continue to operate the business next month? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Have you paid all of your bills on time? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Did you pay your employees on time? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 5. Have you deposited all the receipts for your business into debtor in possession (DIP) accounts? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Have you timely filed your tax returns and paid all of your taxes? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Have you timely filed all other required government filings? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Are you current on your quarterly fee payments to the U.S. Trustee or Bankruptcy Administrator? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 9. Have you timely paid all of your insurance premiums? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

If you answer **Yes** to any of the questions in lines 10-18, attach an explanation and label it **Exhibit B**.

- | | | | |
|---|--------------------------|-------------------------------------|--------------------------|
| 10. Do you have any bank accounts open other than the DIP accounts? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 11. Have you sold any assets other than inventory? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 12. Have you sold or transferred any assets or provided services to anyone related to the DIP in any way? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 13. Did any insurance company cancel your policy? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 14. Did you have any unusual or significant unanticipated expenses? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 15. Have you borrowed money from anyone or has anyone made any payments on your behalf? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 16. Has anyone made an investment in your business? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

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Case number 24-16239-JKS

17. Have you paid any bills you owed before you filed bankruptcy?

☐ ☒ ☐

18. Have you allowed any checks to clear the bank that were issued before you filed bankruptcy?

☐ ☒ ☐

2. Summary of Cash Activity for All Accounts

19. Total opening balance of all accounts

This amount must equal what you reported as the cash on hand at the end of the month in the previous month. If this is your first report, report the total cash on hand as of the date of the filing of this case.

\$ 107.20

20. Total cash receipts

Attach a listing of all cash received for the month and label it *Exhibit C*. Include all cash received even if you have not deposited it at the bank, collections on receivables, credit card deposits, cash received from other parties, or loans, gifts, or payments made by other parties on your behalf. Do not attach bank statements in lieu of *Exhibit C*.

Report the total from *Exhibit C* here.

\$ 57,417.32

21. Total cash disbursements

Attach a listing of all payments you made in the month and label it *Exhibit D*. List the date paid, payee, purpose, and amount. Include all cash payments, debit card transactions, checks issued even if they have not cleared the bank, outstanding checks issued before the bankruptcy was filed that were allowed to clear this month, and payments made by other parties on your behalf. Do not attach bank statements in lieu of *Exhibit D*.

Report the total from *Exhibit D* here.

- \$ 53,072.01

22. Net cash flow

Subtract line 21 from line 20 and report the result here.

This amount may be different from what you may have calculated as *net profit*.

+ \$ 4,345.31

23. Cash on hand at the end of the month

Add line 22 + line 19. Report the result here.

Report this figure as the *cash on hand at the beginning of the month* on your next operating report.

This amount may not match your bank account balance because you may have outstanding checks that have not cleared the bank or deposits in transit.

= \$ 4,452.51

3. Unpaid Bills

Attach a list of all debts (including taxes) which you have incurred since the date you filed bankruptcy but have not paid. Label it *Exhibit E*. Include the date the debt was incurred, who is owed the money, the purpose of the debt, and when the debt is due. Report the total from *Exhibit E* here.

24. Total payables

(*Exhibit E*)

\$ 1,335.93

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4. Money Owed to You

Attach a list of all amounts owed to you by your customers for work you have done or merchandise you have sold. Include amounts owed to you both before, and after you filed bankruptcy. Label it *Exhibit F*. Identify who owes you money, how much is owed, and when payment is due. Report the total from *Exhibit F* here.

25. Total receivables \$ 105,558.21
(Exhibit F)

5. Employees

26. What was the number of employees when the case was filed? 0
27. What is the number of employees as of the date of this monthly report? 0

6. Professional Fees

28. How much have you paid this month in professional fees related to this bankruptcy case? \$ 0.00
29. How much have you paid in professional fees related to this bankruptcy case since the case was filed? \$ 0.00
30. How much have you paid this month in other professional fees? \$ 0.00
31. How much have you paid in total other professional fees since filing the case? \$ 0.00

7. Projections

Compare your actual cash receipts and disbursements to what you projected in the previous month. Projected figures in the first month should match those provided at the initial debtor interview, if any.

	<u>Column A</u>		<u>Column B</u>		<u>Column C</u>
	Projected	—	Actual	=	Difference
	Copy lines 35-37 from the previous month's report.		Copy lines 20-22 of this report.		Subtract Column B from Column A.
32. Cash receipts	\$ <u>35,000.00</u>	—	\$ <u>57,417.32</u>	=	\$ <u>-22,417.32</u>
33. Cash disbursements	\$ <u>30,000.00</u>	—	\$ <u>53,072.01</u>	=	\$ <u>-23,072.01</u>
34. Net cash flow	\$ <u>5,000.00</u>	—	\$ <u>4,345.31</u>	=	\$ <u>654.69</u>
35. Total projected cash receipts for the next month:					\$ <u>45,000.00</u>
36. Total projected cash disbursements for the next month:					- \$ <u>40,000.00</u>
37. Total projected net cash flow for the next month:					= \$ <u>5,000.00</u>

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8. Additional Information

If available, check the box to the left and attach copies of the following documents.

- ☒ 38. Bank statements for each open account (redact all but the last 4 digits of account numbers).
- ☐ 39. Bank reconciliation reports for each account.
- ☐ 40. Financial reports such as an income statement (profit & loss) and/or balance sheet.
- ☐ 41. Budget, projection, or forecast reports.
- ☐ 42. Project, job costing, or work-in-progress reports.

Exhibit C

NJMHC Monthly Operating Report - March 2025

Account No	Posting Date	Description	Receipts
5800	03/31/2025	PHONE/INTERNET TRNFR REF 0900421L FUNDS TRANSFER FRM DEP XXXXX0303 FROM FUNDS TRANSFER VIA MOBILE	1,000.00
5800	03/31/2025	PHONE/INTERNET TRNFR REF 0882215L FUNDS TRANSFER FRM DEP XXXXX3506 FROM FUNDS TRANSFER VIA ONLINE	400.00
5800	03/28/2025	BUS MOBILE DEPOSIT	1,500.00
5800	03/27/2025	PHONE/INTERNET TRNFR REF 0861801L FUNDS TRANSFER FRM DEP XXXXX0303 FROM FUNDS TRANSFER VIA MOBILE	3,495.00
5800	03/26/2025	PHONE/INTERNET TRNFR REF 0851256L FUNDS TRANSFER FRM DEP XXXXX3506 FROM FUNDS TRANSFER VIA ONLINE	500.00
5800	03/25/2025	WIRE IN GFT 202503250012841 MOBILE ONSITE HEAL TH SOLUTIONS LLC	3,500.00
5800	03/25/2025	PHONE/INTERNET TRNFR REF 0841029L FUNDS TRANSFER FRM DEP XXXXX3506 FROM FUNDS TRANSFER VIA ONLINE	109.00
5800	03/25/2025	PHONE/INTERNET TRNFR REF 0841029L FUNDS TRANSFER FRM DEP XXXXX0303 FROM FUNDS TRANSFER VIA ONLINE	370.00
5800	03/24/2025	PHONE/INTERNET TRNFR REF 0830721L FUNDS TRANSFER FRM DEP XXXXX0303 FROM FUNDS TRANSFER VIA ONLINE	418.00
5800	03/21/2025	PHONE/INTERNET TRNFR REF 0800817L FUNDS TRANSFER FRM DEP XXXXX0303 FROM FUNDS TRANSFER VIA ONLINE	205.00
5800	03/18/2025	WIRE IN GFT 202503180005234 LOUIS GRECO	2,000.00
5800	03/18/2025	ACH CREDIT CCD CMPY ID: 1204895317 Bill.com VoidPaymnt USPS - Cadman Plaz a Bill.com 026DLKY ZR1BFW5B Inv PO Bo x 24345 -	124.00
5800	03/17/2025	BUS MOBILE DEPOSIT	6,000.00
5800	03/17/2025	PHONE/INTERNET TRNFR REF 0760517L FUNDS TRANSFER FRM DEP XXXXX0303 FROM FUNDS TRANSFER VIA MOBILE	383.48
5800	03/17/2025	PHONE/INTERNET TRNFR REF 0760516L FUNDS TRANSFER FRM DEP XXXXX3506 FROM FUNDS TRANSFER VIA MOBILE	3,766.00
5800	03/14/2025	PHONE/INTERNET TRNFR REF 0730545L FUNDS TRANSFER FRM DEP XXXXX4901 FROM FUNDS TRANSFER VIA ONLINE	5,820.00
5800	03/14/2025	PHONE/INTERNET TRNFR REF 0730544L FUNDS TRANSFER FRM DEP XXXXX0303 FROM FUNDS TRANSFER VIA ONLINE	26.00
5800	03/12/2025	PHONE/INTERNET TRNFR REF 0711025L FUNDS TRANSFER FRM DEP XXXXX0303 FROM FUNDS TRANSFER VIA ONLINE	20.00
5800	03/11/2025	BUS MOBILE DEPOSIT	600.00
5800	03/07/2025	ACH CREDIT CCD CMPY ID: 9215986202 INTUIT 05149993 DEPOSIT 250307 524771382123961	2,245.00
5800	03/03/2025	ACH CREDIT CCD CMPY ID: 9215986202 INTUIT 90929803 DEPOSIT 250303 524771382123961	940.00
0303	03/31/2025	BUS MOBILE DEPOSIT	1,700.57
0303	03/31/2025	BUS MOBILE DEPOSIT	1,590.00
0303	03/31/2025	BUS MOBILE DEPOSIT	584.19
0303	03/31/2025	BUS MOBILE DEPOSIT	280.72
0303	03/31/2025	BUS MOBILE DEPOSIT	103.19
0303	03/31/2025	BUS MOBILE DEPOSIT	67.96
0303	03/31/2025	ACH CREDIT CCD CMPY ID: 1240200004 NOVITAS HCCLAIMPMT 898629222*12052961 37~	4,026.07
0303	03/28/2025	BUS MOBILE DEPOSIT	94.29
0303	03/27/2025	ACH CREDIT CCD CMPY ID: 1240200004 NOVITAS HCCLAIMPMT 898621074*12052961 37~	1,696.71
0303	03/26/2025	DEPOSIT	1,798.99
0303	03/25/2025	ACH CREDIT CCD CMPY ID: 1240200004 NOVITAS HCCLAIMPMT 898613199*12052961 37~	369.62
0303	03/24/2025	ACH CREDIT CCD CMPY ID: 1240200004 NOVITAS HCCLAIMPMT 898608988*12052961 37~	417.40
0303	03/21/2025	PHONE/INTERNET TRNFR REF 0801550L FUNDS TRANSFER FRM DEP XXXXX3201 FROM FUNDS TRANSFER VIA ONLINE	1.00
0303	03/21/2025	ACH CREDIT CCD CMPY ID: 1240200004 NOVITAS HCCLAIMPMT 898605109*12052961 37~	988.47
0303	03/20/2025	ACH CREDIT CCD CMPY ID: 1240200004 NOVITAS HCCLAIMPMT 898601232*12052961 37~	890.30
0303	03/17/2025	ACH CREDIT CCD CMPY ID: 1240200004 NOVITAS HCCLAIMPMT 898589102*12052961 37~	380.59
0303	03/14/2025	ACH CREDIT CCD CMPY ID: 1240200004 NOVITAS HCCLAIMPMT 898585634*12052961 37~	1,946.90
0303	03/13/2025	ACH CREDIT CCD CMPY ID: 1240200004 NOVITAS HCCLAIMPMT 898581881*12052961 37~	3,696.49
0303	03/12/2025	ACH CREDIT CCD CMPY ID: 10621929SD BANKCARD 1929 MTOT DEP 250312 536927960307817	325.00
0303	03/07/2025	ACH CREDIT CCD CMPY ID: 1240200004 NOVITAS HCCLAIMPMT 898565857*12052961 37~	261.12
0303	03/06/2025	ACH CREDIT CCD CMPY ID: 10621929SD BANKCARD 1929 MTOT DEP 250306 536927960307817	200.00
0303	03/05/2025	ACH CREDIT CCD CMPY ID: 10621929SD BANKCARD 1929 MTOT DEP 250305 536927960307817	20.00
0303	03/03/2025	BUS MOBILE DEPOSIT	159.49
0303	03/03/2025	ACH CREDIT CCD CMPY ID: 1240200004 NOVITAS HCCLAIMPMT 898552176*12052961 37~	2,376.77
3201	03/31/2025	FEE MAINTENANCE CHARGE	
3201	03/03/2025	PHONE/INTERNET TRNFR REF 0621314L FUNDS TRANSFER FRM DEP XXXXX5800 FROM FUNDS TRANSFER VIA ONLINE	20.00

57,417.32

Exhibit D

NJMHC Monthly Operating Report - March 2025

Account No	Posting Date	Description	Disbursements
5800	03/31/2025	ACH DEBIT WEB CMPY ID: 1882511058 Pirate Ship 8444455854 250331	8.40
5800	03/31/2025	ACH DEBIT WEB CMPY ID: 1882511058 Pirate Ship 8444455854 250331	6.44
5800	03/31/2025	ACH DEBIT WEB CMPY ID: 1882511058 Pirate Ship 8444455854 250331	6.03
5800	03/31/2025	PHONE/INTERNET TRNFR REF 0901526L FUNDS TRANSFER TO DEP XXXXX3506 FROM FUNDS TRANSFER VIA ONLINE	900.00
5800	03/28/2025 1072	CHECK	5,460.10
5800	03/28/2025	ACH DEBIT WEB CMPY ID: 1911718107 GOTO COMMUNICATI GOTO/JIVE 250328	450.92
5800	03/27/2025	ACH DEBIT WEB CMPY ID: 1882511058 Pirate Ship 8444455854 250327	27.20
5800	03/25/2025	FORCE POST DEBIT FOR OVERDRAFT CHECK # 1071	30.00
5800	03/25/2025	PHONE/INTERNET TRNFR REF 0841744L FUNDS TRANSFER TO DEP XXXXX3506 FROM FUNDS TRANSFER VIA ONLINE	2,900.00
5800	03/24/2025 1071	CHECK	1,273.43
5800	03/21/2025	FORCE POST DEBIT FOR OVERDRAFT CHECK # 1070	30.00
5800	03/21/2025	FORCE POST DEBIT FOR OVERDRAFT ACH DEBIT 021000022792792	30.00
5800	03/21/2025 1068	CHECK	58.36
5800	03/21/2025	ACH DEBIT WEB CMPY ID: 1882511058 Pirate Ship 8444455854 250321	8.40
5800	03/21/2025	ACH DEBIT WEB CMPY ID: 1882511058 Pirate Ship 8444455854 250321	8.40
5800	03/21/2025	ACH DEBIT WEB CMPY ID: 1882511058 Pirate Ship 8444455854 250321	8.40
5800	03/21/2025	PHONE/INTERNET TRNFR REF 0800817L FUNDS TRANSFER FRM DEP XXXXXX0303 FROM FUNDS TRANSFER VIA ONLINE	
5800	03/20/2025 1070	CHECK	80.00
5800	03/20/2025	ACH DEBIT WEB CMPY ID: 1882511058 Pirate Ship 8444455854 250320	8.40
5800	03/20/2025	ACH DEBIT CCD CMPY ID: 0000756346 INTUIT * QBooks Onl 250320 4498525	100.00
5800	03/19/2025	ACH DEBIT WEB CMPY ID: 1882511058 Pirate Ship 8444455854 250319	8.40
5800	03/19/2025	ACH DEBIT WEB CMPY ID: 1882511058 Pirate Ship 8444455854 250319	8.40
5800	03/19/2025	ACH DEBIT WEB CMPY ID: 1882511058 Pirate Ship 8444455854 250319	8.40
5800	03/19/2025	ACH DEBIT WEB CMPY ID: 1882511058 Pirate Ship 8444455854 250319	8.40
5800	03/19/2025	PHONE/INTERNET TRNFR REF 0780737L FUNDS TRANSFER TO DEP XXXXX3506 FROM FUNDS TRANSFER VIA MOBILE	1,101.00
5800	03/18/2025	ACH DEBIT CCD CMPY ID: 0000756346 INTUIT * QBooks Onl 250318 3671416	65.00
5800	03/18/2025	PHONE/INTERNET TRNFR REF 0771117L FUNDS TRANSFER TO DEP XXXXX3506 FROM FUNDS TRANSFER VIA ONLINE	1,000.00
5800	03/17/2025	ANALYSIS RESULTS CHG ANALYSIS ACTIVITY FOR 02/25	40.00
5800	03/17/2025	FEE BASED CHARGE FEE BASED ACTIVITY FOR 02/25	0.56
5800	03/17/2025	FORCE POST DEBIT FOR OVERDRAFT CHECK # 1067	30.00
5800	03/17/2025	ACH DEBIT CCD CMPY ID: 1472319830 AFCO CREDIT CORP PAYMENTS 250317 23042579	4,100.45
5800	03/17/2025	ACH DEBIT CCD CMPY ID: 1204895317 Bill.com Payables East Coast Medical Consultants (was Bill.com 026QKLEKX 1BCMF1 Inv 14	550.00
5800	03/14/2025 1067	CHECK	7,440.00
5800	03/14/2025	PHONE/INTERNET TRNFR REF 0731256L FUNDS TRANSFER TO DEP XXXXX3506 FROM FUNDS TRANSFER VIA ONLINE	3,741.65
5800	03/12/2025	FORCE POST DEBIT FOR OVERDRAFT ACH DEBIT 021000023089087	30.00
5800	03/12/2025	ACH DEBIT WEB CMPY ID: 1882511058 Pirate Ship 8444455854 250312	8.40
5800	03/11/2025	FORCE POST DEBIT FOR OVERDRAFT CHECK # 1066	30.00

Exhibit D

NJMHC Monthly Operating Report - March 2025

Account No	Posting Date	Description	Disbursements
5800	03/11/2025	FORCE POST DEBIT FOR OVERDRAFT ACH DEBIT 021000023756683	30.00
5800	03/11/2025	ACH DEBIT CCD CMPY ID: 1082689000 BILL.COM LLC BILLING BILL.COM 02B4CCMAN XHPGYW STMT 250380 67375 NJ MOBILE HE	116.76
5800	03/11/2025	ACH DEBIT WEB CMPY ID: 1882511058 Pirate Ship 8444455854 250311	8.40
5800	03/10/2025 1066	CHECK	109.25
5800	03/10/2025	ACH DEBIT PPD CMPY ID: 9078730001 OPTIMUM 7873 CABLE PMNT 250310	341.69
5800	03/07/2025	ACH DEBIT WEB CMPY ID: 1882511058 Pirate Ship 8444455854 250307	15.80
5800	03/07/2025	ACH DEBIT WEB CMPY ID: 1882511058 Pirate Ship 8444455854 250307	8.40
5800	03/07/2025	ACH DEBIT CCD CMPY ID: 9215986202 INTUIT 23299013 TRAN FEE 250307 524771382123961	67.13
5800	03/07/2025	PHONE/INTERNET TRNFR REF 0661219L FUNDS TRANSFER TO DEP XXXXX3506 FROM FUNDS TRANSFER VIA ONLINE	25.00
5800	03/07/2025	PHONE/INTERNET TRNFR REF 0660844L FUNDS TRANSFER TO DEP XXXXX3506 FROM FUNDS TRANSFER VIA ONLINE	2,100.00
5800	03/05/2025	PHONE/INTERNET TRNFR REF 0640834L FUNDS TRANSFER TO DEP XXXXX3506 FROM FUNDS TRANSFER VIA MOBILE	877.00
5800	03/04/2025	ACH DEBIT WEB CMPY ID: 1882511058 Pirate Ship 8444455854 250304	8.40
5800	03/04/2025	ACH DEBIT CCD CMPY ID: 1204895317 Bill.com Payables Robert Suarez B ill.com 026TLRJUC1 AQ50H Inv 50620081 0277	90.91
5800	03/03/2025	ACH DEBIT CCD CMPY ID: 9215986202 INTUIT 09439093 TRAN FEE 250303 524771382123961	9.40
5800	03/03/2025	ACH DEBIT WEB CMPY ID: 1882511058 Pirate Ship 8444455854 250303	8.40
5800	03/03/2025	PHONE/INTERNET TRNFR REF 0621314L FUNDS TRANSFER TO DEP XXXXX3201 FROM FUNDS TRANSFER VIA ONLINE	20.00
0303	03/31/2025	FEE MAINTENANCE CHARGE	15.00
0303	03/31/2025	PHONE/INTERNET TRNFR REF 0901526L FUNDS TRANSFER TO DEP XXXXX3506 FROM FUNDS TRANSFER VIA ONLINE	3,120.00
0303	03/31/2025	PHONE/INTERNET TRNFR REF 0900421L FUNDS TRANSFER TO DEP XXXXX5800 FROM FUNDS TRANSFER VIA MOBILE	1,000.00
0303	03/27/2025	PHONE/INTERNET TRNFR REF 0861801L FUNDS TRANSFER TO DEP XXXXX5800 FROM FUNDS TRANSFER VIA MOBILE	3,495.00
0303	03/25/2025	PHONE/INTERNET TRNFR REF 0841029L FUNDS TRANSFER TO DEP XXXXX5800 FROM FUNDS TRANSFER VIA ONLINE	370.00
0303	03/24/2025	PHONE/INTERNET TRNFR REF 0830721L FUNDS TRANSFER TO DEP XXXXX5800 FROM FUNDS TRANSFER VIA ONLINE	418.00
0303	03/21/2025	PHONE/INTERNET TRNFR REF 0800819L FUNDS TRANSFER TO DEP XXXXX3506 FROM FUNDS TRANSFER VIA ONLINE	758.78
0303	03/21/2025	PHONE/INTERNET TRNFR REF 0800818L FUNDS TRANSFER TO DEP XXXXX4901 FROM FUNDS TRANSFER VIA ONLINE	25.00
0303	03/21/2025	PHONE/INTERNET TRNFR REF 0800817L FUNDS TRANSFER TO DEP XXXXX5800 FROM FUNDS TRANSFER VIA ONLINE	205.00
0303	03/20/2025	PHONE/INTERNET TRNFR REF 0791540L FUNDS TRANSFER TO DEP XXXXX3506 FROM FUNDS TRANSFER VIA ONLINE	890.00
0303	03/17/2025	PHONE/INTERNET TRNFR REF 0760517L FUNDS TRANSFER TO DEP XXXXX5800 FROM FUNDS TRANSFER VIA MOBILE	383.48
0303	03/14/2025	PHONE/INTERNET TRNFR REF 0730544L FUNDS TRANSFER TO DEP XXXXX4901 FROM FUNDS TRANSFER VIA ONLINE	5,820.00
0303	03/14/2025	PHONE/INTERNET TRNFR REF 0730544L FUNDS TRANSFER TO DEP XXXXX5800 FROM FUNDS TRANSFER VIA ONLINE	26.00
0303	03/12/2025	PHONE/INTERNET TRNFR REF 0711025L FUNDS TRANSFER TO DEP XXXXX5800 FROM FUNDS TRANSFER VIA ONLINE	20.00
0303	03/12/2025	PHONE/INTERNET TRNFR REF 0711024L FUNDS TRANSFER TO DEP XXXXX3506 FROM FUNDS TRANSFER VIA ONLINE	100.00
0303	03/07/2025	PHONE/INTERNET TRNFR REF 0660845L FUNDS TRANSFER TO DEP XXXXX3506 FROM FUNDS TRANSFER VIA ONLINE	641.00
0303	03/03/2025	ACH DEBIT CCD CMPY ID: 10621929SM BANKCARD 1929 MTOT DISC 250303 536927960307817	50.07
0303	03/03/2025	PHONE/INTERNET TRNFR REF 0621312L FUNDS TRANSFER TO DEP XXXXX3506 FROM FUNDS TRANSFER VIA ONLINE	2,317.00
3201	03/31/2025	FEE MAINTENANCE CHARGE	15.00
3201	03/21/2025	PHONE/INTERNET TRNFR REF 0801550L FUNDS TRANSFER TO DEP XXXXX0303 FROM FUNDS TRANSFER VIA ONLINE	1.00

53,072.01

Exhibit E

Monthly Operating Report - March 2025

Question 24: Total Payables

Breen Bros Towing Inc	975.00
Front Line EMS Billing LLC	<u>360.93</u>
TOTAL	1,335.93

Exhibit F
Monthly Operating Report - March 2025

Aging Report

Current Payor	Trip Count	Current	31 to 60	61 to 90	91 to 120	121 to 150	151 to 180	181 to 546	Over 546	Total
-- None --	10	10,550.00	3,000.00	-	-	740.00	-	-	-	14,290.00
AARP MEDICARE SUPPLEMENT PLAN	18	662.55	825.59	346.01	224.12	-	71.21	-	-	2,129.48
AETNA - COMMERCIAL	1	-	1,088.55	-	-	-	-	-	-	1,088.55
AETNA - MEDICARE ADVANTAGE	1	1,701.00	-	-	-	-	-	-	-	1,701.00
AETNA BETTER HEALTH OF NJ - MEDICAID	2	1,584.00	107.14	-	-	-	-	-	-	1,691.14
AMERICAN CONTINENTAL INSURANCE CO - AETNA - MEDICARE SUPPLEMENTAL	1	-	280.72	-	-	-	-	-	-	280.72
AMERIGROUP NJ / WELLPOINT - MEDICAID	5	307.73	106.48	271.85	-	-	-	-	-	686.06
BCBS HORIZON NJ - COMMERCIAL	4	391.65	-	-	-	-	-	-	-	391.65
BCBS HORIZON NJ DSNP/TOTAL CARE - MEDICARE ADVANTAGE	1	1,657.50	-	-	-	-	-	-	-	1,657.50
BCBS HORIZON NJ HEALTH - MEDICAID	4	104.83	815.00	-	-	740.00	-	(106.25)	-	1,553.58
BERGEN NEW BRIDGE MEDICAL CENTER	24	-	-	440.00	5,224.50	401.50	-	148.50	-	6,214.50
Bill Patient	48	9,707.61	3,213.52	5,974.72	-	-	-	-	-	18,895.85
CHAMPVA	1	-	-	87.20	-	-	-	-	-	87.20
CHRISTIAN BROTHERS SERVICES/HBS	1	-	1,530.00	-	-	-	-	-	-	1,530.00
CIGNA	1	97.09	-	-	-	-	-	-	-	97.09
CLOVER HEALTH - MEDICARE ADVANTAGE	2	-	-	1,620.00	-	684.50	-	-	-	2,304.50
FIDELIS CARE (FORMERLY WELLCARE) - MEDICAID	4	106.48	293.24	-	-	-	-	-	-	399.72
HUMANA - MEDICARE ADVANTAGE	2	1,635.00	1,524.00	-	-	-	-	-	-	3,159.00
LONGEVITY HEALTH PLAN - MEDICARE ADVANTAGE	2	123.98	1,545.00	-	-	-	-	-	-	1,668.98
MAGNACARE	1	99.56	-	-	-	-	-	-	-	99.56
MEDICAID NJ	5	974.35	-	-	-	-	65.85	65.85	-	1,106.05
MEDICARE NJ	21	22,989.00	3,770.00	1,603.50	-	-	2,731.50	-	-	31,094.00
MUTUAL OF OMAHA - MEDICARE SUPPLEMENTAL	2	106.48	-	-	115.36	-	-	-	-	221.84
NAHGA CLAIM SERVICES	1	216.60	-	-	-	-	-	-	-	216.60
SAINT MICHAEL'S MEDICAL CENTER	2	-	-	-	-	-	319.30	364.80	-	684.10
TRANSAMERICA LIFE	1	-	103.68	-	-	-	-	-	-	103.68
UNITEDHEALTHCARE - COMMERCIAL (87726)	1	-	-	-	-	1,085.00	-	-	-	1,085.00
UNITEDHEALTHCARE - MEDICAID (86047)	4	-	156.62	1,584.00	-	-	64.95	-	-	1,805.57
UNITEDHEALTHCARE - MEDICARE ADVANTAGE (87726)	7	9,913.50	-	-	-	-	902.00	-	-	10,815.50
UNITEDHEALTHCARE DUAL SNP - MEDICARE ADVANTAGE (86047)	4	-	-	-	-	-	-	4,565.50	-	4,565.50
WELLCARE DUAL LIBERTY D-SNP - MEDICARE ADVANTAGE (14163)	1	102.02	-	-	-	-	-	-	-	102.02
Totals: Payors: 31	182	63,030.93	18,359.54	11,927.28	5,563.98	3,651.00	4,154.81	5,038.40	-	111,725.94

Overall Totals

Current Payor	Trip Count	Current	31 to 60	61 to 90	91 to 120	121 to 150	151 to 180	181 to 546	Over 546	Total
Totals: Payors: 31	182	63,030.93	18,359.54	11,927.28	5,563.98	3,651.00	4,154.81	5,038.40	-	111,725.94
								Uncollectable VRM		(87,146.23)
										24,579.71
								Non-VRM Receivables		80,978.50
								Total Receivables		105,558.21



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20632 M0656DDA040125083206 08 000000000 248490 005



NJ MOBILE HEALTH CARE LLC
DIP CASE # 24-16239 RECEIVING ACCOUNT
575 CORPORATE DR SUITE 525
MAHWAH NJ 07430-2330



Email: contactus@valley.com



Visit Us Online: www.valley.com



Mail To: 1720 Route 23, Wayne, NJ 07470

Account Statement

VALLEY BASIC BUSINESS CHECKING - XXXXXX0303

SUMMARY FOR THE PERIOD: 03/01/25 - 03/31/25

NJ MOBILE HEALTH CARE LLC

Beginning Balance	+	Deposits & Other Credits	-	Withdrawals & Other Debits	=	Ending Balance
-\$8.80		\$23,975.84		\$19,654.33		\$4,312.71

TRANSACTIONS

Date	Description	Withdrawals & Other Debits	Deposits & Other Credits	Balance
	Beginning Balance			-\$8.80
03/03	ACH CREDIT NOVITAS HCCLAIMPMT 898552176*12052961 37~		\$2,376.77	\$2,367.97
03/03	BUS MOBILE DEPOSIT		\$159.49	\$2,527.46
03/03	PHONE/INTERNET TRNFR REF 0621312L FUNDS TRANSFER TO DEP XXXXX3506 FROM FUNDS TRANSFER VIA ONLINE	-\$2,317.00		\$210.46
03/03	ACH DEBIT BANKCARD 1929 MTOT DISC 250303 536927960307817	-\$50.07		\$160.39
03/05	ACH CREDIT BANKCARD 1929 MTOT DEP 250305 536927960307817		\$20.00	\$180.39
03/06	ACH CREDIT BANKCARD 1929 MTOT DEP 250306 536927960307817		\$200.00	\$380.39
03/07	ACH CREDIT NOVITAS HCCLAIMPMT 898565857*12052961 37~		\$261.12	\$641.51
03/07	PHONE/INTERNET TRNFR REF 0660845L FUNDS TRANSFER TO DEP XXXXX3506 FROM FUNDS TRANSFER VIA ONLINE	-\$641.00		\$0.51
03/12	ACH CREDIT		\$325.00	\$325.51





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TRANSACTIONS (continued)

Date	Description	Withdrawals & Other Debits	Deposits & Other Credits	Balance
	BANKCARD 1929 MTOT DEP 250312 536927960307817			
03/12	PHONE/INTERNET TRNFR REF 0711024L FUNDS TRANSFER TO DEP XXXXXX3506 FROM FUNDS TRANSFER VIA ONLINE	-\$100.00		\$225.51
03/12	PHONE/INTERNET TRNFR REF 0711025L FUNDS TRANSFER TO DEP XXXXXX5800 FROM FUNDS TRANSFER VIA ONLINE	-\$20.00		\$205.51
03/13	ACH CREDIT NOVITAS HCCLAIMPMT 898581881*12052961 37~		\$3,696.49	\$3,902.00
03/14	ACH CREDIT NOVITAS HCCLAIMPMT 898585634*12052961 37~		\$1,946.90	\$5,848.90
03/14	PHONE/INTERNET TRNFR REF 0730544L FUNDS TRANSFER TO DEP XXXXXX5800 FROM FUNDS TRANSFER VIA ONLINE	-\$26.00		\$5,822.90
03/14	PHONE/INTERNET TRNFR REF 0730544L FUNDS TRANSFER TO DEP XXXXXX4901 FROM FUNDS TRANSFER VIA ONLINE	-\$5,820.00		\$2.90
03/17	ACH CREDIT NOVITAS HCCLAIMPMT 898589102*12052961 37~		\$380.59	\$383.49
03/17	PHONE/INTERNET TRNFR REF 0760517L FUNDS TRANSFER TO DEP XXXXXX5800 FROM FUNDS TRANSFER VIA MOBILE	-\$383.48		\$0.01
03/20	ACH CREDIT NOVITAS HCCLAIMPMT 898601232*12052961 37~		\$890.30	\$890.31
03/20	PHONE/INTERNET TRNFR REF 0791540L FUNDS TRANSFER TO DEP XXXXXX3506 FROM FUNDS TRANSFER VIA ONLINE	-\$890.00		\$0.31
03/21	ACH CREDIT NOVITAS HCCLAIMPMT 898605109*12052961 37~		\$988.47	\$988.78
03/21	PHONE/INTERNET TRNFR REF 0801550L FUNDS TRANSFER FRM DEP XXXXXX3201 FROM FUNDS TRANSFER VIA ONLINE		\$1.00	\$989.78
03/21	PHONE/INTERNET TRNFR REF 0800817L FUNDS TRANSFER TO DEP XXXXXX5800 FROM FUNDS TRANSFER VIA ONLINE	-\$205.00		\$784.78
03/21	PHONE/INTERNET TRNFR	-\$25.00		\$759.78





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TRANSACTIONS (continued)

Date	Description	Withdrawals & Other Debits	Deposits & Other Credits	Balance
03/21	REF 0800818L FUNDS TRANSFER TO DEP XXXXXX4901 FROM FUNDS TRANSFER VIA ONLINE PHONE/INTERNET TRNFR	-\$758.78		\$1.00
03/24	REF 0800819L FUNDS TRANSFER TO DEP XXXXXX3506 FROM FUNDS TRANSFER VIA ONLINE ACH CREDIT		\$417.40	\$418.40
03/24	NOVITAS HCCLAIMPMT 898608988*12052961 37~ PHONE/INTERNET TRNFR	-\$418.00		\$0.40
03/25	REF 0830721L FUNDS TRANSFER TO DEP XXXXXX5800 FROM FUNDS TRANSFER VIA ONLINE ACH CREDIT		\$369.62	\$370.02
03/25	NOVITAS HCCLAIMPMT 898613199*12052961 37~ PHONE/INTERNET TRNFR	-\$370.00		\$0.02
03/26	REF 0841029L FUNDS TRANSFER TO DEP XXXXXX5800 FROM FUNDS TRANSFER VIA ONLINE DEPOSIT		\$1,798.99	\$1,799.01
03/27	ACH CREDIT NOVITAS HCCLAIMPMT 898621074*12052961 37~		\$1,696.71	\$3,495.72
03/27	PHONE/INTERNET TRNFR REF 0861801L FUNDS TRANSFER TO DEP XXXXXX5800 FROM FUNDS TRANSFER VIA MOBILE	-\$3,495.00		\$0.72
03/28	BUS MOBILE DEPOSIT		\$94.29	\$95.01
03/31	ACH CREDIT NOVITAS HCCLAIMPMT 898629222*12052961 37~		\$4,026.07	\$4,121.08
03/31	BUS MOBILE DEPOSIT		\$67.96	\$4,189.04
03/31	BUS MOBILE DEPOSIT		\$103.19	\$4,292.23
03/31	BUS MOBILE DEPOSIT		\$280.72	\$4,572.95
03/31	BUS MOBILE DEPOSIT		\$584.19	\$5,157.14
03/31	BUS MOBILE DEPOSIT		\$1,590.00	\$6,747.14
03/31	BUS MOBILE DEPOSIT		\$1,700.57	\$8,447.71
03/31	PHONE/INTERNET TRNFR REF 0900421L FUNDS TRANSFER TO DEP XXXXXX5800 FROM FUNDS TRANSFER VIA MOBILE	-\$1,000.00		\$7,447.71
03/31	PHONE/INTERNET TRNFR REF 0901526L FUNDS TRANSFER TO DEP XXXXXX3506 FROM FUNDS TRANSFER VIA ONLINE	-\$3,120.00		\$4,327.71
03/31	FEE MAINTENANCE CHARGE	-\$15.00		\$4,312.71
Ending Balance				\$4,312.71





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OVERDRAFT FEES

	Total This Period:	Total Year-To-Date:
Total Overdraft Fees:	\$0.00	\$0.00

48490 0826283 0004-0005 248490





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To Reconcile Your Account

1. Compare the checks listed as paid on your statement with the entries appearing in your checkbook to insure that they have been properly charged to your account.
2. Create a list of all checks that have been issued by you but have not been paid by Valley (Check(s) Outstanding).
3. Add to your checkbook balance any credit not already recorded in the checkbook.
4. Deduct from your checkbook any service charge or other charges (including automatic deductions) which you have not already recorded in your checkbook.
5. Follow the instructions listed in the Balance Reconciliation section below.

Balance Reconciliation

1 Enter ending statement balance	
2 Add deposits recorded in your checkbook but not shown on this statement.	
3 Total (1 plus 2 above)	
4 Subtract total check(s) outstanding	
5 Balance (3 less 4 should equal checkbook balance)	

Finance Charge Computation For Personal Line Of Credit

The Finance Charge that accrues in any monthly billing period is determined on each day in the monthly billing cycle by multiplying the Daily Periodic Rate by the outstanding principal balance (after subtracting payments and adding advances posted that day); then we add the results of these calculations for the number of days in the billing cycle. The Daily Periodic Rate is the Annual Percentage Rate in effect during the monthly billing cycle divided by 365.

In Case Of Errors Or Questions About Your Personal Line Of Credit Transactions**A. Pursuant To The Federal Fair Credit Billing Act**

If you think your statement is wrong or if you need more information about checking transactions on your statement which did not arise from an electronic transfer, write us as soon as possible at Valley National Bank, Attn: Customer Care, 1720 Route 23, Wayne, NJ 07470-7533, or email us at contactus@valley.com. We must hear from you no later than 60 days after we sent you the first statement on which the error or problem appeared. You can contact us at 800-522-4100, but doing so will not preserve your rights. In your letter, give us your name and account number and the dollar amount of the suspected error. Describe the error and explain, if you can,

why you believe there is an error. If you need more information, describe the item you are unsure about. You do not have to pay any amount in question while we are investigating, but you are still obligated to pay the parts of your statement that are not in question. While we investigate your question, we cannot report you as delinquent or take any action to collect the amount you question.

B. Under Applicable State Law

If you rely upon the 3 months period provided by state law, you may lose important rights that could be preserved by action more promptly under the federal law described in the first paragraph in this section. State law provisions apply only after expiration of the time period for submitting a proper written notice of a billing error under federal law.

In Case Of Error Or Questions About Your Electronic Transfers (Pursuant to the Electronic Fund Transfer Act. Applicable to personal accounts only; does not pertain to wire transfers.)

If you think your statement or receipt is wrong or if you need more information about an electronic transfer on the statement or receipt, please contact us at 800-522-4100; write us at Valley National Bank, Attn: Customer Care, 1720 Route 23, Wayne, NJ 07470-7533, or email us at contactus@valley.com. We must hear from you no later than 60 days after we sent you the first statement on which the error or problem appeared. Tell us your name and account number and the dollar amount of the suspected error. Describe the error or the transfer you are unsure about, and explain as clearly as you can why you believe it is an error or why you need more information. We will investigate your complaint and will correct any error promptly. If we take more than 10 business days to do this or 20 business days if your notice of error involves an electronic fund transfer to or from the account within 30 days after the first deposit to the account was made, we will provisionally credit your account for the amount you think is in error, so that you will have the use of the money during the time it takes us to complete our investigation.

For additional terms and conditions applicable to your account statement, please refer to your account agreement.



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55740 M0656DDA040125083206 07 000000000 211645 007

NJ MOBILE HEALTH CARE LLC
DIP CASE # 24-16239 OPERATING ACCOUNT
575 CORPORATE DR SUITE 525
MAHWAH NJ 07430-2330

Email: contactus@valley.com



Visit Us Online: www.valley.com



Mail To: 1720 Route 23, Wayne, NJ 07470

Account Statement

BUSINESS BANKING CHECKING - XXXXXX5800

SUMMARY FOR THE PERIOD: 03/01/25 - 03/31/25

NJ MOBILE HEALTH CARE LLC

Beginning Balance	+	Deposits & Other Credits	-	Withdrawals & Other Debits	=	Ending Balance
\$75.00		\$33,421.48		\$33,401.68		\$94.80

TRANSACTIONS

Date	Description	Withdrawals & Other Debits	Deposits & Other Credits	Balance
	Beginning Balance			\$75.00
03/03	ACH CREDIT INTUIT 90929803 DEPOSIT 250303 524771382123961		\$940.00	\$1,015.00
03/03	PHONE/INTERNET TRNFR REF 0621314L FUNDS TRANSFER TO DEP XXXXXX3201 FROM FUNDS TRANSFER VIA ONLINE	-\$20.00		\$995.00
03/03	ACH DEBIT Pirate Ship 8444455854 250303	-\$8.40		\$986.60
03/03	ACH DEBIT INTUIT 09439093 TRAN FEE 250303 524771382123961	-\$9.40		\$977.20
03/04	ACH DEBIT Bill.com Payables Robert Suarez B ill.com 026TLRJUC1 AQ50H Inv 50620081 0277	-\$90.91		\$886.29
03/04	ACH DEBIT Pirate Ship 8444455854 250304	-\$8.40		\$877.89
03/05	PHONE/INTERNET TRNFR REF 0640834L FUNDS TRANSFER TO DEP XXXXXX3506 FROM FUNDS TRANSFER VIA MOBILE	-\$877.00		\$0.89
03/07	ACH CREDIT INTUIT 05149993 DEPOSIT 250307 524771382123961		\$2,245.00	\$2,245.89
03/07	PHONE/INTERNET TRNFR	-\$2,100.00		\$145.89





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TRANSACTIONS (continued)

Date	Description	Withdrawals & Other Debits	Deposits & Other Credits	Balance
03/07	REF 0660844L FUNDS TRANSFER TO DEP XXXXXX3506 FROM FUNDS TRANSFER VIA ONLINE PHONE/INTERNET TRNFR REF 0661219L FUNDS TRANSFER TO DEP XXXXXX3506 FROM FUNDS TRANSFER VIA ONLINE	-\$25.00		\$120.89
03/07	ACH DEBIT INTUIT 23299013 TRAN FEE 250307 524771382123961	-\$67.13		\$53.76
03/07	ACH DEBIT Pirate Ship 8444455854 250307	-\$8.40		\$45.36
03/07	ACH DEBIT Pirate Ship 8444455854 250307	-\$15.80		\$29.56
03/10	ACH DEBIT OPTIMUM 7873 CABLE PMNT 250310	-\$341.69		-\$312.13
03/10	CHECK 1066	-\$109.25		-\$421.38
03/11	BUS MOBILE DEPOSIT		\$600.00	\$178.62
03/11	ACH DEBIT Pirate Ship 8444455854 250311	-\$8.40		\$170.22
03/11	ACH DEBIT BILL.COM LLC BILLING BILL.COM 02B4CCMAN XHPGYW STMT 250380 67375 NJ MOBILE HE ALTHCARE DIP	-\$116.76		\$53.46
03/11	PAID ITEM FEE FOR OVERDRAFT ACH DEBIT 021000023756683	-\$30.00		\$23.46
03/11	PAID ITEM FEE FOR OVERDRAFT CHECK # 1066	-\$30.00		-\$6.54
03/12	PHONE/INTERNET TRNFR REF 0711025L FUNDS TRANSFER FRM DEP XXXXXX0303 FROM FUNDS TRANSFER VIA ONLINE		\$20.00	\$13.46
03/12	ACH DEBIT Pirate Ship 8444455854 250312	-\$8.40		\$5.06
03/12	PAID ITEM FEE FOR OVERDRAFT ACH DEBIT 021000023089087	-\$30.00		-\$24.94
03/14	PHONE/INTERNET TRNFR REF 0730544L FUNDS TRANSFER FRM DEP XXXXXX0303 FROM FUNDS TRANSFER VIA ONLINE		\$26.00	\$1.06
03/14	PHONE/INTERNET TRNFR REF 0730545L FUNDS TRANSFER FRM DEP XXXXXX4901 FROM FUNDS TRANSFER VIA ONLINE		\$5,820.00	\$5,821.06
03/14	PHONE/INTERNET TRNFR REF 0731256L FUNDS TRANSFER TO DEP XXXXXX3506 FROM FUNDS TRANSFER VIA ONLINE	-\$3,741.65		\$2,079.41
03/14	CHECK 1067	-\$7,440.00		-\$5,360.59
03/17	PHONE/INTERNET TRNFR		\$3,766.00	-\$1,594.59





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TRANSACTIONS (continued)

Date	Description	Withdrawals & Other Debits	Deposits & Other Credits	Balance
03/17	REF 0760516L FUNDS TRANSFER FRM DEP XXXXXX3506 FROM FUNDS TRANSFER VIA MOBILE			
03/17	PHONE/INTERNET TRNFR REF 0760517L FUNDS TRANSFER FRM DEP XXXXXX0303 FROM FUNDS TRANSFER VIA MOBILE		\$383.48	-\$1,211.11
03/17	BUS MOBILE DEPOSIT		\$6,000.00	\$4,788.89
03/17	ACH DEBIT Bill.com Payables East Coast Medical Consultants (was Bill.com 026QKLEXK 1BCMF1 Inv 1460	-\$550.00		\$4,238.89
03/17	ACH DEBIT AFCO CREDIT CORP PAYMENTS 250317 23042579	-\$4,100.45		\$138.44
03/17	PAID ITEM FEE FOR OVERDRAFT CHECK # 1067	-\$30.00		\$108.44
03/17	FEE BASED CHARGE FEE BASED ACTIVITY FOR 02/25	-\$0.56		\$107.88
03/17	ANALYSIS RESULTS CHG ANALYSIS ACTIVITY FOR 02/25	-\$40.00		\$67.88
03/18	ACH CREDIT Bill.com VoidPaymnt USPS - Cadman Plaz a Bill.com 026DLKY ZR1BFW5B Inv PO Bo x 24345 - 01/25--		\$124.00	\$191.88
03/18	WIRE IN 202503180005234 LOUIS GRECO		\$2,000.00	\$2,191.88
03/18	PHONE/INTERNET TRNFR REF 0771117L FUNDS TRANSFER TO DEP XXXXXX3506 FROM FUNDS TRANSFER VIA ONLINE	-\$1,000.00		\$1,191.88
03/18	ACH DEBIT INTUIT * QBooks Onl 250318 3671416	-\$65.00		\$1,126.88
03/19	PHONE/INTERNET TRNFR REF 0780737L FUNDS TRANSFER TO DEP XXXXXX3506 FROM FUNDS TRANSFER VIA MOBILE	-\$1,101.00		\$25.88
03/19	ACH DEBIT Pirate Ship 8444455854 250319	-\$8.40		\$17.48
03/19	ACH DEBIT Pirate Ship 8444455854 250319	-\$8.40		\$9.08
03/19	ACH DEBIT Pirate Ship 8444455854 250319	-\$8.40		\$0.68
03/19	ACH DEBIT Pirate Ship 8444455854 250319	-\$8.40		-\$7.72
03/20	ACH DEBIT INTUIT * QBooks Onl 250320 4498525	-\$100.00		-\$107.72
03/20	ACH DEBIT Pirate Ship 8444455854 250320	-\$8.40		-\$116.12
03/20	CHECK 1070	-\$80.00		-\$196.12
03/21	PHONE/INTERNET TRNFR		\$205.00	\$8.88





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TRANSACTIONS (continued)

Date	Description	Withdrawals & Other Debits	Deposits & Other Credits	Balance
	REF 0800817L FUNDS TRANSFER FRM DEP XXXXXX0303 FROM FUNDS TRANSFER VIA ONLINE			
03/21	ACH DEBIT Pirate Ship 8444455854 250321	-\$8.40		\$0.48
03/21	ACH DEBIT Pirate Ship 8444455854 250321	-\$8.40		-\$7.92
03/21	ACH DEBIT Pirate Ship 8444455854 250321	-\$8.40		-\$16.32
03/21	CHECK 1068	-\$58.36		-\$74.68
03/21	PAID ITEM FEE FOR OVERDRAFT ACH DEBIT 021000022792792	-\$30.00		-\$104.68
03/21	PAID ITEM FEE FOR OVERDRAFT CHECK # 1070	-\$30.00		-\$134.68
03/24	PHONE/INTERNET TRNFR REF 0830721L FUNDS TRANSFER FRM DEP XXXXXX0303 FROM FUNDS TRANSFER VIA ONLINE		\$418.00	\$283.32
03/24	CHECK 1071	-\$1,273.43		-\$990.11
03/25	PHONE/INTERNET TRNFR REF 0841029L FUNDS TRANSFER FRM DEP XXXXXX0303 FROM FUNDS TRANSFER VIA ONLINE		\$370.00	-\$620.11
03/25	PHONE/INTERNET TRNFR REF 0841029L FUNDS TRANSFER FRM DEP XXXXXX3506 FROM FUNDS TRANSFER VIA ONLINE		\$109.00	-\$511.11
03/25	WIRE IN 202503250012841 MOBILE ONSITE HEAL TH SOLUTIONS LLC		\$3,500.00	\$2,988.89
03/25	PHONE/INTERNET TRNFR REF 0841744L FUNDS TRANSFER TO DEP XXXXXX3506 FROM FUNDS TRANSFER VIA ONLINE	-\$2,900.00		\$88.89
03/25	PAID ITEM FEE FOR OVERDRAFT CHECK # 1071	-\$30.00		\$58.89
03/26	PHONE/INTERNET TRNFR REF 0851256L FUNDS TRANSFER FRM DEP XXXXXX3506 FROM FUNDS TRANSFER VIA ONLINE		\$500.00	\$558.89
03/27	PHONE/INTERNET TRNFR REF 0861801L FUNDS TRANSFER FRM DEP XXXXXX0303 FROM FUNDS TRANSFER VIA MOBILE		\$3,495.00	\$4,053.89
03/27	ACH DEBIT Pirate Ship 8444455854 250327	-\$27.20		\$4,026.69
03/28	BUS MOBILE DEPOSIT		\$1,500.00	\$5,526.69
03/28	ACH DEBIT GOTO COMMUNICATI GOTO/JIVE 250328	-\$450.92		\$5,075.77
03/28	CHECK 1072	-\$5,460.10		-\$384.33
03/31	PHONE/INTERNET TRNFR		\$400.00	\$15.67





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TRANSACTIONS (continued)

Date	Description	Withdrawals & Other Debits	Deposits & Other Credits	Balance
03/31	REF 0882215L FUNDS TRANSFER FRM DEP XXXXXX3506 FROM FUNDS TRANSFER VIA ONLINE			
03/31	PHONE/INTERNET TRNFR REF 0900421L FUNDS TRANSFER FRM DEP XXXXXX0303 FROM FUNDS TRANSFER VIA MOBILE		\$1,000.00	\$1,015.67
03/31	PHONE/INTERNET TRNFR REF 0901526L FUNDS TRANSFER TO DEP XXXXXX3506 FROM FUNDS TRANSFER VIA ONLINE	-\$900.00		\$115.67
03/31	ACH DEBIT Pirate Ship 8444455854 250331	-\$6.03		\$109.64
03/31	ACH DEBIT Pirate Ship 8444455854 250331	-\$6.44		\$103.20
03/31	ACH DEBIT Pirate Ship 8444455854 250331	-\$8.40		\$94.80
Ending Balance				\$94.80

CHECKS IN ORDER

Date	Number	Amount	Date	Number	Amount
03/10	1066	\$109.25	03/20	1070*	\$80.00
03/14	1067	\$7,440.00	03/24	1071	\$1,273.43
03/21	1068	\$58.36	03/28	1072	\$5,460.10

(*) Check Number Missing or Check Converted to Electronic Transaction and Listed under the Transaction section.

OVERDRAFT FEES

	Total This Period:	Total Year-To-Date:
Total Overdraft Fees:	\$210.00	\$330.00





Account Number:

XXXXXX5800

Statement Date:

03/31/2025

Page :

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P.O. Box 558

Wayne, NJ 07474-0558

Check Images for Account XXXXXX5800

NJ MOBILE HEALTH CARE LLC
575 CORPORATE DR SUITE 525
MAHWAH, NJ 07430-2330

DATE 3/7/25 55-138212

PAY TO THE ORDER OF Charles Brucley \$ 109.25

one hundred nine and 25/100 DOLLARS

FOR T Mobile Reimbursement

1066

1001066 021201383 5800

Capital One, NA
30976568 03072025
Richmond, VA 23238
RDC Deposit *****2193

03/10/2025

1066

\$109.25

NJ MOBILE HEALTH CARE LLC
575 CORPORATE DR SUITE 525
MAHWAH, NJ 07430-2330

DATE 3/8/25 55-138212

PAY TO THE ORDER OF Charles Brucley \$ 80.00

Eighty and 00/100 DOLLARS

FOR Fuel Reimbursement

1070

1001070 021201383 5800

Capital One, NA
30976568 03192025
Richmond, VA 23238
RDC Deposit *****2193

03/20/2025

1070

\$80.00

NJ MOBILE HEALTH CARE LLC
575 CORPORATE DR SUITE 525
MAHWAH, NJ 07430-2330

DATE 3/13/2025 55-138212

PAY TO THE ORDER OF TransUnit LLC \$ 17,440.00

Seven Thousand Four hundred Forty and 00/100 DOLLARS

FOR 3/14/2025 pay roll

1067

1001067 021201383 5800

JP Morgan Chase Bank 031303 000948 927840102311

For Deposit Only
569285755

03/14/2025

1067

\$7,440.00

NJ MOBILE HEALTH CARE LLC
575 CORPORATE DR SUITE 525
MAHWAH, NJ 07430-2330

DATE 3/20/2025 55-138212

PAY TO THE ORDER OF Mahwah Automotive Center \$ 1,273.43

One thousand two hundred seventy three and 43/100 DOLLARS

FOR 24848

1071

1001071 021201383 5800

Wells Fargo Bank, N.A.
FOR DEPOSIT ONLY
MAHWAH AUTOMOTIVE CENTER
6941520514

03/24/2025

1071

\$1,273.43

NJ MOBILE HEALTH CARE LLC
575 CORPORATE DR SUITE 525
MAHWAH, NJ 07430-2330

DATE March 14 2025 55-138212

PAY TO THE ORDER OF Southern Pict Master \$ 58.36

Five and 36/100 DOLLARS

FOR Boys

1068

1001068 021201383 800

Capital One, NA
30976568 0317012118
Richmond, VA 23238
RDC Deposit *****2193

03/21/2025

1068

\$58.36

NJ MOBILE HEALTH CARE LLC
575 CORPORATE DR SUITE 525
MAHWAH, NJ 07430-2330

DATE 3/27/2025 55-138212

PAY TO THE ORDER OF TransUnit LLC \$ 5,460.10

Five Thousand Four hundred Sixty and 10/100 DOLLARS

FOR Staffing

1072

1001072 021201383 5800

JP Morgan Chase Bank 032704 000948 927840126345

For Deposit Only
569285755

03/28/2025

1072

\$5,460.10



Account Number:

XXXXXX5800

Statement Date:

03/31/2025

Page :

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P.O. Box 558

Wayne, NJ 07474-0558

To Reconcile Your Account

1. Compare the checks listed as paid on your statement with the entries appearing in your checkbook to insure that they have been properly charged to your account.
2. Create a list of all checks that have been issued by you but have not been paid by Valley (Check(s) Outstanding).
3. Add to your checkbook balance any credit not already recorded in the checkbook.
4. Deduct from your checkbook any service charge or other charges (including automatic deductions) which you have not already recorded in your checkbook.
5. Follow the instructions listed in the Balance Reconciliation section below.

Balance Reconciliation

1 Enter ending statement balance	
2 Add deposits recorded in your checkbook but not shown on this statement.	
3 Total (1 plus 2 above)	
4 Subtract total check(s) outstanding	
5 Balance (3 less 4 should equal checkbook balance)	

Finance Charge Computation For Personal Line Of Credit

The Finance Charge that accrues in any monthly billing period is determined on each day in the monthly billing cycle by multiplying the Daily Periodic Rate by the outstanding principal balance (after subtracting payments and adding advances posted that day); then we add the results of these calculations for the number of days in the billing cycle. The Daily Periodic Rate is the Annual Percentage Rate in effect during the monthly billing cycle divided by 365.

In Case Of Errors Or Questions About Your Personal Line Of Credit Transactions**A. Pursuant To The Federal Fair Credit Billing Act**

If you think your statement is wrong or if you need more information about checking transactions on your statement which did not arise from an electronic transfer, write us as soon as possible at Valley National Bank, Attn: Customer Care, 1720 Route 23, Wayne, NJ 07470-7533, or email us at contactus@valley.com. We must hear from you no later than 60 days after we sent you the first statement on which the error or problem appeared. You can contact us at 800-522-4100, but doing so will not preserve your rights. In your letter, give us your name and account number and the dollar amount of the suspected error. Describe the error and explain, if you can,

why you believe there is an error. If you need more information, describe the item you are unsure about. You do not have to pay any amount in question while we are investigating, but you are still obligated to pay the parts of your statement that are not in question. While we investigate your question, we cannot report you as delinquent or take any action to collect the amount you question.

B. Under Applicable State Law

If you rely upon the 3 months period provided by state law, you may lose important rights that could be preserved by action more promptly under the federal law described in the first paragraph in this section. State law provisions apply only after expiration of the time period for submitting a proper written notice of a billing error under federal law.

In Case Of Error Or Questions About Your Electronic Transfers (Pursuant to the Electronic Fund Transfer Act. Applicable to personal accounts only; does not pertain to wire transfers.)

If you think your statement or receipt is wrong or if you need more information about an electronic transfer on the statement or receipt, please contact us at 800-522-4100; write us at Valley National Bank, Attn: Customer Care, 1720 Route 23, Wayne, NJ 07470-7533, or email us at contactus@valley.com. We must hear from you no later than 60 days after we sent you the first statement on which the error or problem appeared. Tell us your name and account number and the dollar amount of the suspected error. Describe the error or the transfer you are unsure about, and explain as clearly as you can why you believe it is an error or why you need more information. We will investigate your complaint and will correct any error promptly. If we take more than 10 business days to do this or 20 business days if your notice of error involves an electronic fund transfer to or from the account within 30 days after the first deposit to the account was made, we will provisionally credit your account for the amount you think is in error, so that you will have the use of the money during the time it takes us to complete our investigation.

For additional terms and conditions applicable to your account statement, please refer to your account agreement.





P.O. Box 558
Wayne, NJ 07474-0558

Last Statement:
Statement Ending:
Page:

February 28, 2025
March 31, 2025
1 of 2

14880 M0656DDA040125083206 07 000000000 170785 002



NJ MOBILE HEALTH CARE LLC
DIP CASE # 24-16239 PPSF ACCOUNT
575 CORPORATE DR SUITE 525
MAHWAH NJ 07430-2330



Email: contactus@valley.com



Visit Us Online: www.valley.com



Mail To: 1720 Route 23, Wayne, NJ 07470

Account Statement

VALLEY BASIC BUSINESS CHECKING - XXXXXX3201

SUMMARY FOR THE PERIOD: 03/01/25 - 03/31/25

NJ MOBILE HEALTH CARE LLC

Beginning Balance	+	Deposits & Other Credits	-	Withdrawals & Other Debits	=	Ending Balance
-\$13.99		\$20.00		\$16.00		-\$9.99

TRANSACTIONS

Date	Description	Withdrawals & Other Debits	Deposits & Other Credits	Balance
	Beginning Balance			-\$13.99
03/03	PHONE/INTERNET TRNFR REF 0621314L FUNDS TRANSFER FRM DEP XXXXXX5800 FROM FUNDS TRANSFER VIA ONLINE		\$20.00	\$6.01
03/21	PHONE/INTERNET TRNFR REF 0801550L FUNDS TRANSFER TO DEP XXXXXX0303 FROM FUNDS TRANSFER VIA ONLINE	-\$1.00		\$5.01
03/31	FEE MAINTENANCE CHARGE	-\$15.00		-\$9.99
Ending Balance				-\$9.99

OVERDRAFT FEES

	Total This Period:	Total Year-To-Date:
Total Overdraft Fees:	\$0.00	\$0.00





Account Number:

XXXXXX3201

Statement Date:

03/31/2025

Page :

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P.O. Box 558

Wayne, NJ 07474-0558

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4. Deduct from your checkbook any service charge or other charges (including automatic deductions) which you have not already recorded in your checkbook.
5. Follow the instructions listed in the Balance Reconciliation section below.

Balance Reconciliation

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why you believe there is an error. If you need more information, describe the item you are unsure about. You do not have to pay any amount in question while we are investigating, but you are still obligated to pay the parts of your statement that are not in question. While we investigate your question, we cannot report you as delinquent or take any action to collect the amount you question.

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For additional terms and conditions applicable to your account statement, please refer to your account agreement.

